24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	
	C C00499020
Check if 24-hour report X 48-hour report New report Amends report filed	I on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Arrowhead Graphics, Inc.	M - M / D - D / Y - Y - Y - Y
Mailing Address 508 Houston St	05 01 2014 Amount
City State Zip Code	1040.01
Greensboro NC 27401	Transaction ID : SE.27046 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Signage Category/ Type 004	05 01 2014
Name of Federal Candidate Support Offic	e Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose	President State: MS
Calendar Year-To-Date Per Election for Office Sought Disb. 2014	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Arrowhead Graphics, Inc.	05 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 508 Houston St	03 02 2014
	Amount
City State Zip Code	1223.68
Greensboro NC 27401	Transaction ID : SE.27045 Date of Disbursement or Obligation
Purpose of Expenditure Category/ Category/	M M / D D / Y Y Y Y Y
IE-McDaniel-Yard Signs/Stickers Type 004	05 02 2014
Name of Federal Candidate Support Office	e Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose	President Senate State: MS
457000.04	ursement For: Primary General
Per Election for Office Sought 157999.21 2014	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2263.69
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed] Date	05 06 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
	<u> </u>
Check if 24-hour report X 48-hour report New report Amends report filed	on
Full Name of Payee Freedomworks, Inc.	Date of Public Distribution/Dissemination
, and the second	04 29 7 2014
Mailing Address 400 N Capitol St., NW	Amount
Suite 735	Amount
City State Zip Code	137.27
Washington DC 20001	Transaction ID : SE.27043 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Category/ Type 004	04 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose	President X Senate State: MS
	rsement For: X Primary General
Per Election for Office Sought 155515.70 2014	Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	04 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 400 N Capitol St., NW	
Suite 735	Amount
City State Zip Code	113.56
Washington DC 20001	Transaction ID : SE.27044 Date of Disbursement or Obligation
Purpose of Expenditure Category/ Category/	M M / D D / Y Y Y Y
IE-McDaniel-Email/Social Media/Printing Category/ Type 004	04 30 2014
Name of Federal Candidate Support Office	e Sought: House District:00
CHRISTOPHER BRIAN MCDANIEL Oppose	President Senate State: MS
	ursement For: X Primary General
Per Election for Office Sought 155629.26 2014	
(a) SUBTOTAL of Itemized Independent Expenditures	250.83
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed] Date	5 06 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
	<u> </u>
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 400 N Capitol St., NW	
Suite 735	Amount
City State Zip Code	106.26
Washington DC 20001	Transaction ID : SE.27051 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Category/ Type 004	05 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose	President X Senate State: MS
450775 50	rsement For: X Primary General
Per Election for Office Sought 156775.53 2014	Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 400 N Capitol St., NW	
Suite 735	Amount
City State Zip Code	106.26
Washington DC 20001	Transaction ID : SE.27047 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Email/Social Media/Printing Category/ Type 004	M M / D D / Y Y Y
Type Type	05 02 2014
	e Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose	President Senate State: MS
2014	ırsement For: X Primary General
Per Election for Office Sought 158105.47 2014	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	212.52
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
R. Russ Walker [Electronically Filed] Date	5 06 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
Check if 24-hour report X 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Freedomworks, Inc.	05
Mailing Address 400 N Capitol St., NW	Amount
Suite 735	
City State Zip Code Washington DC 20001	583.57
	Transaction ID : SE.27049 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Travel Category/ Type 002	05 04 7 2014
Name of Federal Candidate Support Office	ee Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose	President State: MS
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Topple Strategies	M M / D D / Y Y Y Y
Mailing Address 189 N. Hwy 89 Ste. C 130	05 04 2014 Amount
	Amount
City State Zip Code	30005.00
North Salt Lake UT 84054	Transaction ID : SE.27050 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Phone Calling Category/ Type 004	05 / 04 / 2014
Name of Federal Candidate Support Office	ce Sought: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose	President State: MS Senate
Calendar Year-To-Date Per Election for Office Sought Disb. 2016	oursement For: Primary General Other (specify) Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	30588.57
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	33315.61
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
[Electronically Filed] Date	05 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	